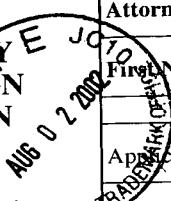


**DECLARATION AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)



Attorney Docket Number 20052YP

First Named Inventor Liu, et al.

COMPLETE IF KNOWN

Application Number 09/601,582

Filing Date

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Group Art Unit

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Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NOVEL GABAB RECEPTOR DNA SEQUENCES

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) 12/04/2000 as United States Application Number or PCT InternationalApplication Number 09/601,582 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
PCT/US99/02361	02/03/1999			<input checked="" type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>
				<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/073,767	02/05/1998	20052PV

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US99/02361	02/03/1999	RECEIVED
60/073,767	02/05/2098	AUG 07 2002
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Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorneys or agents with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Customer Number	<input type="text"/>	→	Place Customer Number Bar Code Label here
OR			
<input checked="" type="checkbox"/> Registered practitioner(s) name/registration number listed below			

Name	Registration Number	Name	Registration Number
Joseph A. Coppola	38,413	Jack L. Tribble	32,633

Direct all correspondence to: Customer Number or Bar Code Label

000210

Name	Joseph A. Coppola				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-6734		Fax (732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])			Family Name or Surname		
Qingyun			Liu		
Inventor's Signature				Date	
Residence: City	North Wales	State	PA	Country	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000				
City	Rahway	State	NJ	ZIP	07065-0907
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>2</u> supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.					

Please type a plus sign (+) inside this box

Approved for use through 9/30/2000. OMB 651-0032

SUBSTITUTE for PTO/SB/52A (3-97), Declaration (Additional Inventors)

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Terrence		McDonald					
Inventor's Signature					Date		
Residence: City	Langhorne	State	PA	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Timothy P.		Bonnert					
Inventor's Signature					Date		
Residence: City	Hartfordshire	State		Country	UK	Citizenship	UK
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Gordon		Ng					
Inventor's Signature					Date		
Residence: City	Point-Claire	State		Country	CA	Citizenship	CA
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Lee F.		Kolakowski, Jr.					
Inventor's Signature					Date	June 24, 2002	
Residence: City	Timonium	State	MD	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		

DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

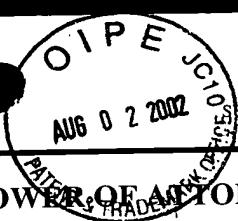
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Janet		Clark					
Inventor's Signature					Date		
Residence: City	Bethesda	State	MD	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Tom I.		Bonner					
Inventor's Signature					Date		
Residence: City	Bethesda	State	MD	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		

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F-2 (2-97) Declaration - Supplemental Priority Data Sheet

DECLARATION AND POWER OF ATTORNEY -- Supplemental Priority Data Sheet